

PTO/SB/21 (06-2009)

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/770562
	Filing Date	1/26/2001
	First Named Inventor	William J. Curatolo
	Art Unit	1618
	Examiner Name	FUBARA, BLESSING M
Total Number of Pages in This Submission	Attorney Docket Number	0003.0562/PC9674A-US

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input checked="" type="checkbox"/> Appeal Communication to TC (Appeal Brief, Copy of Appeal Notice) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Copy Notice of Appeal; Return Acknowledgment Postcard
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

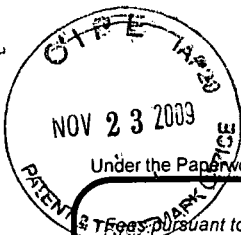
Firm	Chernoff, Vilhauer, McClung & Stenzel, L.L.P.		
Signature			
Printed Name	Dennis E. Stenzel		
Date	11/19/09	Reg. No.	28,763

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Signature			
Typed or printed name	Dennis E. Stenzel	Date	11/19/09

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Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

**FEE TRANSMITTAL
for FY 2009**☐ Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT (\$)** 540 (paid 7/30/2009)**Complete if Known**

Application Number	09/770562
Filing Date	1/26/2001
First Named Inventor	Bend Research, Inc.
Examiner Name	FUBARA, BLESSING M
Art Unit	1618
Attorney Docket No.	0003.0562

METHOD OF PAYMENT (check all that apply)

- ☐ Check ☐ Credit Card ☐ Money Order ☒ None ☐ Other (please identify): _____
- ☒ Deposit Account Deposit Account Number: 03-1550 Deposit Account Name: Chernoff Vilhauer
- For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)
- ☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
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FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	330	165	540	270	220	110	
Design	220	110	100	50	140	70	
Plant	220	110	330	165	170	85	
Reissue	330	165	540	270	650	325	
Provisional	220	110	0	0	0	0	

2. EXCESS CLAIM FEESFee Description

Each claim over 20 (including Reissues)
Each independent claim over 3 (including Reissues)
Multiple dependent claims

Small Entity	
Fee (\$)	Fee (\$)
52	26
220	110
390	195

Total Claims Extra Claims Fee (\$) Fee Paid (\$)

_____ - 20 or HP = _____ X _____ = _____
HP = highest number of total claims paid for, if greater than 20.

Multiple Dependant Claims

Fee (\$) Fee Paid (\$)

Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)

_____ - 3 or HP = _____ X _____ = _____
HP = highest number of total claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)

_____ - 100 = _____ / 50 = _____ (round up to a whole number) X _____ = _____

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Appeal Brief Filing Fee - Previously submitted July 30, 2009

Fee Paid (\$)\$540 (paid 7/30/09)**SUBMITTED BY**

Signature		Registration No. (Attorney/Agent)	28,763	Telephone	(503) 278-3304
Name (Print/Type)	Dennis E. Stenzel	Date	11/19/09		

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